

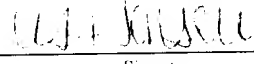
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Michael J. Briskin, Douglas J. Ringler, Dominic Picarella and Walter Newman

Application No.: 08/875,849 Group: 1644

Filed: September 8, 1997 Examiner: R. Schwadron

For: MUCOSAL VASCULAR ADDRESSINS AND USES THEREOF

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, Washington, D.C. 20231	
on 02/28/00	
Date	Signature
Lisa Jensen	
Typed or printed name of person signing certificate	

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment A for filing in the above-identified application.

☒ Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a verified statement previously submitted.

☐ A verified statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)	(COL. 2)	(COL. 3)	(COL. 4)	(COL. 5)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	61	MINUS	* 27	34
INDEP	13	MINUS	** 8	5
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

SMALL ENTITY	
RATE	ADDIT. FEE
X \$ 9	\$ 306
X \$39	\$ 195
+ \$130	\$

OTHER THAN SMALL ENTITY	
RATE	ADDIT. FEE
X \$18	\$
X \$78	\$
+ \$260	\$

OR

TOTAL = \$ 501

TOTAL = \$ 0

* not fewer than 20

** not fewer than 3

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for <input type="checkbox"/> month Extension of Time	\$	<u> </u>
<input type="checkbox"/>	Amendment Fee	\$	<u> </u>
<input type="checkbox"/>	Other Fees:		
		\$	<u> </u>
		\$	<u> </u>
	TOTAL:	\$	<u> 0 </u>

A check is enclosed in payment of the following fees:

<input checked="" type="checkbox"/>	Petition for three month Extension of Time	\$	<u> 435 </u>
<input checked="" type="checkbox"/>	Amendment Fee	\$	<u> 501 </u>
<input type="checkbox"/>	Other Fees:		
		\$	<u> </u>
		\$	<u> </u>
	TOTAL:	\$	<u> 936 </u>

☒ A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Robert H. Underwood
Robert H. Underwood
Registration No.: 45,170
Telephone: (781) 861-6240
Facsimile: (781) 861-9540

Lexington, Massachusetts 02421-4799

Dated: February 28, 2000